

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American Health Care Association Political Action Committee

ADDRESS (number and street)

1201 L Street, NW

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00006080

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anna Lee -Assistant Treas

Signature of Treasurer

Electronically Filed by Anna Lee -Assistant Treas

Date

07

12

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		371526.17
(b) Cash on Hand at Beginning of Reporting Period	362996.02	
(c) Total Receipts (from Line 19)	35859.60	323973.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	398855.62	695499.39
7. Total Disbursements (from Line 31)	101742.29	398386.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	297113.33	297113.33
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	30963.68	297469.78
(i) Itemized (use Schedule A)		
(ii) Unitemized	4895.92	24503.44
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	35859.60	321973.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	35859.60	321973.22
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	2000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35859.60	323973.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35859.60	323973.22

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		242.29	3886.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		242.29	3886.06
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		101500.00	391000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	3500.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		101742.29	398386.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		101742.29	398386.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	35859.60	321973.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35859.60	321973.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	242.29	3886.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	242.29	3886.06

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

FRED A WATSON

Mailing Address 1781 HWY 92

City State Zip Code
 FAIRBURN GA 30213-3507

FEC ID number of contributing
federal political committee.

C

Name of Employer
GHCA

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 2 / 2 0 0 6

Transaction ID: 24084336

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)

Mr. Daniel Mathis

Mailing Address 2170 E Harmon Avenue

City State Zip Code
 Las Vegas NV 89119-7840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Director

Occupation
Harman Medical & Rehab Hospital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 6

Transaction ID: 24146794

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Mr David Kylo

Mailing Address 4621 28th Road South
 PAYROLL DEDUCTION

City State Zip Code
 Arlington VA 22206-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer
AHCA

Occupation
Director, Assisted Living

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.04

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 6

Transaction ID: 24146815

Amount of Each Receipt this Period

39.56

SUBTOTAL of Receipts This Page (optional)

2339.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr Fred Watson
Mailing Address 160 Country Club Dr.

City State Zip Code
Stockbridge GA 30281-7344

FEC ID number of contributing
federal political committee.

C

Name of Employer
Georgia Nursing Home Asso-
c.

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 6

Transaction ID: 24146930

Amount of Each Receipt this Period

1800.00

B. Full Name (Last, First, Middle Initial)
Mr Robert Van Dyk
Mailing Address 304 South Van Dien

City State Zip Code
Ridgewood NJ 07450-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Van Dyk Health Care

Occupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 6

Transaction ID: 24163849

Amount of Each Receipt this Period

1250.00

C. Full Name (Last, First, Middle Initial)
Mr David Kylo
Mailing Address 4621 28th Road South
PAYROLL DEDUCTION

City State Zip Code
Arlington VA 22206-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer
AHCA

Occupation
Director, Assisted Living

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.60

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 6

Transaction ID: 24163880

Amount of Each Receipt this Period

39.56

SUBTOTAL of Receipts This Page (optional)

3089.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Brain Lee			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 1430 Prigress Way Suite 108			Transaction ID: 24192066	
City Eldersburg		State MD	Zip Code 21784-6484	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer Nexion Health Care		Occupation General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) Mr Mark S. McKenize			Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6	
Mailing Address 7955 Harry Hines Blvd St. 200			Transaction ID: 24196384	
City Dallas		State TX	Zip Code 75035	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer THI Care		Occupation Sup-OPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
C. Full Name (Last, First, Middle Initial) Mr William Dunn			Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address 195 Executive Dr			Transaction ID: 24201973	
City Marion		State OH	Zip Code 43302-6391	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer Marion Manor Nursing Hm Inc		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr Theodore Lee		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address 700 Hanover St		Transaction ID: 24202245
City Manchester	State NH	Zip Code 03104-5398
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hanover Hill Health Care	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mr Kent Stebbins		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 1009 Clyde Street		Transaction ID: 24202930
City Amarillo	State TX	Zip Code 79106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Stebbins Five Companies	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Mr Kent Stebbins		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address 1009 Clyde Street		Transaction ID: 24203001
City Amarillo	State TX	Zip Code 79106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Stebbins Five Companies	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Ms Darlene Daugherty

Mailing Address 2247 C.R. 341

City State Zip Code
 Marble Falls TX 78654

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gateway Villa

Occupation
Owner/Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 6

Transaction ID: 24203140

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

Ms. Elizabeth Casey

Mailing Address 3075 E. Thousand Oaks Blvd.

City State Zip Code
 Westlake Village CA 91362

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Chase Group

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 0 6

Transaction ID: 24203741

Amount of Each Receipt this Period

1250.00

C. Full Name (Last, First, Middle Initial)

Ms. Susan Chase

Mailing Address 5374 Long Shadow Ct.

City State Zip Code
 Westlake Village CA 91362-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Chase Group

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 0 6

Transaction ID: 24203743

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Roberts Nelson Mailing Address 3075 E. Thousand Oaks Blvd. City State Zip Code Westlake Village CA 91362-3453 FEC ID number of contributing federal political committee. C Name of Employer The Chase Group Occupation Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6 Transaction ID: 24203744 Amount of Each Receipt this Period 1250.00
B. Full Name (Last, First, Middle Initial) Mr William Biggs Mailing Address 101 Grace Street City State Zip Code Easley SC 29640 FEC ID number of contributing federal political committee. C Name of Employer Health Managemnet Resources Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 24216037 Amount of Each Receipt this Period 1250.00
C. Full Name (Last, First, Middle Initial) Mr. Michael Torgan Mailing Address 4551 Glencoe Ave. Suite 300 City State Zip Code Marina del Rey CA 90292-7925 FEC ID number of contributing federal political committee. C Name of Employer Country Villa Health Svcs. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 24216039 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Michael Shepard

Mailing Address 6810 S. Hazel

City State Zip Code
PineBluff AR

FEC ID number of contributing
federal political committee.

C

Name of Employer
Daois Life Care

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216043

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Mr. James Gomez

Mailing Address 2201 K Street

City State Zip Code
Sacramento CA 95816-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer
CA Association of Health
Facilities

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216045

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Mr. Don Gormly

Mailing Address 1685 Shaffer

City State Zip Code
Atwater CA 95301-4456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anberry Rehab Hosp

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216047

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 / 39

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Francis P. Kirley
Mailing Address 3315 Timbers Rd

City State Zip Code
Flower Mound TX 75028-2064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nexion Health, Inc.

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216049

Amount of Each Receipt this Period

1250.00

B. Full Name (Last, First, Middle Initial)
Mr William Kempiners
Mailing Address 1029 S 4th St

City State Zip Code
Springfield IL 62703-2224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Illinois Health Care Assn

Occupation
Director of Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216051

Amount of Each Receipt this Period

125.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Miller
Mailing Address 9403 Mill Brook Rd

City State Zip Code
Louisville KY 40223-4010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kentucky Health Care Assn.

Occupation
State Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216053

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. Rick Mendlen Mailing Address 1810 Gillespie Way Ste. 212 City State Zip Code El Cajon CA 92020-0921 FEC ID number of contributing federal political committee. C Name of Employer Kennon Shea & Assoc. Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 24216057 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Mr. Frank Romano Mailing Address 57 Summer St. City State Zip Code Rowley MA 01969-1835 FEC ID number of contributing federal political committee. C Name of Employer Essex Group Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3750.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 24216059 Amount of Each Receipt this Period 1250.00
C. Full Name (Last, First, Middle Initial) Mr. Frank Bellinger Mailing Address 3215 East Cheyenne Ave. City State Zip Code North Las Vegas NV 89030-4215 FEC ID number of contributing federal political committee. C Name of Employer North Las Vegas Care Center Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 24216063 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Darrell R. Cammack
Mailing Address 9900 Walthen Blvd

City State Zip Code
Baltimore MD 21234-5785

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quail Run Assisted Living

Occupation
Owner, CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216065

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mr Alfred Santos

Mailing Address 57 Kilvert Street
Suite 200

City State Zip Code
Warwick RI 02886-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rhode Island Healthcare
Assn

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216067

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Ms Dixie Taylor-Huff

Mailing Address 932 Baddour Parkway

City State Zip Code
Lebanon TN 37087-3707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quality Care Health Center

Occupation
Administrator/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216070

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr Mark S. McKenize

Mailing Address 7955 Harry Hines Blvd St. 200

City State Zip Code
Dallas TX 75035

FEC ID number of contributing
federal political committee.

C

Name of Employer
THI Care

Occupation
Sup-OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216072

Amount of Each Receipt this Period

75.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles Perry

Mailing Address 2912 W. Oakley Blvd.

City State Zip Code
Las Vegas NV 89102-2081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nevada Health Care Assn.

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216074

Amount of Each Receipt this Period

2350.00

C. Full Name (Last, First, Middle Initial)
Ms. Ruth Braswell

Mailing Address 3674 Pacific Ave

City State Zip Code
Riverside CA 92509-1948

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vista Pacifica Enterprises

Occupation
Comm. Relations Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216076

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

3675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Leona Tinkey

Mailing Address 803 Cherry Drive

City State Zip Code
Hershey PA 17033-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation
VP, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216078

Amount of Each Receipt this Period

125.00

B. Full Name (Last, First, Middle Initial)
Mr. Don B. Bedell

Mailing Address P.O. Box 1210

City State Zip Code
Sikeston MO 63801-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Facilities Mgmt Co.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216080

Amount of Each Receipt this Period

1250.00

C. Full Name (Last, First, Middle Initial)
Mr Don C. Bedell

Mailing Address 731 North Main St.
PO Box 1210

City State Zip Code
Sikeston MO 63801-2176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Facilities Mgmt Co-
rp

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216082

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

2625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr Richard Miller
Mailing Address 3594 E US Highway 30

City State Zip Code
Warsaw IN 46580-6720

FEC ID number of contributing
federal political committee.

C

Name of Employer
MMM Invest Inc

Occupation
CEO/CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216084

Amount of Each Receipt this Period

1250.00

B. Full Name (Last, First, Middle Initial)
David E. Meillier
Mailing Address 27 Brand Avenue

City State Zip Code
Faribault MN 55021-6411

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pleasant Manor Inc

Occupation
Administrator/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216086

Amount of Each Receipt this Period

1250.00

C. Full Name (Last, First, Middle Initial)
Howard Groff
Mailing Address 9031 Penn. Ave. South

City State Zip Code
Bloomington MN 55431-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tealwood Care Centers Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216088

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Jim Cooper

Mailing Address PO Box 506

City State Zip Code
 Melbourne AR 72556-0506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cooper Mgmt. Corp.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216300

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Mr Jay Moskowitz

Mailing Address 2932 Fenton Street

City State Zip Code
 Wheat Ridge CO 80214-8116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quality Life Management

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216366

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Ms. Leona Tinkey

Mailing Address 803 Cherry Drive

City State Zip Code
 Hershey PA 17033-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Meadows

Occupation
VP, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216487

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Patricia Giorgio
Mailing Address 3410 12th Ave. SW

City State Zip Code
Cedar Rapids IA 52404-1375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Evergreen Estates

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216494

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Giorgio
Mailing Address 3410 12th Ave. SW

City State Zip Code
Cedar Rapids IA 52404-1375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Evergreen Estates

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 24216497

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
Ms. Lyn Bentley
Mailing Address 2212 Hidden Valley Lane

City State Zip Code
Silver Spring MD 20904-5240

FEC ID number of contributing
federal political committee.

C

Name of Employer
AHCA

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 24217593

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr David Kylo

Mailing Address 4621 28th Road South
PAYROLL DEDUCTION

City State Zip Code
Arlington VA 22206-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer
AHCA

Occupation
Director, Assisted Living

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.16

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: 24217618

Amount of Each Receipt this Period

39.56

SUBTOTAL of Receipts This Page (optional)

39.56

TOTAL This Period (last page this line number only)

30963.68

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Health Care Assoc PAC

Mailing Address 1201 L Street NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 24289442

Date of Disbursement

/ /

Amount of Each Disbursement this Period

242.29

SUBTOTAL of Disbursements This Page (optional)

242.29

TOTAL This Period (last page this line number only)

242.29

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Burr Committee

Mailing Address PO Box 5928

City
Winston-Salem

State
NC

Zip Code
27113

Purpose of Disbursement
Void - Richard Burr Committee

Candidate Name
Mr Richard Burr

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼
2010Primary

State: NC District: 5

Transaction ID: 24071458

Date of Disbursement

06 / 01 / 2006

Amount of Each Disbursement this Period

-1000.00

Void - Richard Burr Commi-
tee

Full Name (Last, First, Middle Initial)

B. Sue Kelly for Congress

Mailing Address 187 Jay St.

City
Katonah

State
NY

Zip Code
10536

Purpose of Disbursement
Void - Sue Kelly for Congress

Candidate Name
Ms. Sue Kelly

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: 24071635

Date of Disbursement

06 / 01 / 2006

Amount of Each Disbursement this Period

-1500.00

Void - Sue Kelly for Cong-
ress

Full Name (Last, First, Middle Initial)

C. Hulshof for Congress

Mailing Address 1005 Cherry Street, Suite 203

City
Columbia

State
MO

Zip Code
65201

Purpose of Disbursement
Void - Hulshof for Congress

Candidate Name
Mr. Kenny Hulshof

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 9

Transaction ID: 24071527

Date of Disbursement

06 / 01 / 2006

Amount of Each Disbursement this Period

-1000.00

Void - Hulshof for Congre-
ss

SUBTOTAL of Disbursements This Page (optional)

-3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. People with Hart

Mailing Address PO Box 435

City
Wexford

State
PA

Zip Code
15090

Purpose of Disbursement
Void - People with Hart

Candidate Name
Ms. Melissa Hart

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 4

Transaction ID: 24071603

Date of Disbursement

06 / 01 / 2006

Amount of Each Disbursement this Period

-1500.00

Void - People with Hart

Full Name (Last, First, Middle Initial)

B. Friends of Patrick Kennedy

Mailing Address P.O. Box 1356
1505 Longworth HOB

City
Providence

State
RI

Zip Code
02901

Purpose of Disbursement
Void - Friends of Patrick Kennedy

Candidate Name
Mr. Patrick Kennedy

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: RI District: 1

Transaction ID: 24079810

Date of Disbursement

06 / 02 / 2006

Amount of Each Disbursement this Period

-1000.00

Void - Friends of Patrick Kennedy

Full Name (Last, First, Middle Initial)

C. Phil PAC

Mailing Address 104 Hume Avenue

City
Alexandria

State
VA

Zip Code
22301

Purpose of Disbursement
Void - Phil PAC

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 24080047

Date of Disbursement

06 / 02 / 2006

Amount of Each Disbursement this Period

-1000.00

Void - Phil PAC

SUBTOTAL of Disbursements This Page (optional)

-3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Red Rooster Leadership PAC

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24083919

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)

B. Castor For Congress

Mailing Address PO Box 5419

City Tampa State FL Zip Code 33675

Purpose of Disbursement

Candidate Name
Katherine Castor

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 11

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24083920

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)

C. Storm Chaser Leadership PAC

Mailing Address P.O. Box 237

City Monticello State IN Zip Code 47966

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24084133

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Reed Committee

Mailing Address 200 Midway Rd, Ste 168

City Cranston State RI Zip Code 02920

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. Jack Reed

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: RI District: 2

Transaction ID: 24084492

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Nelson for Senate

Mailing Address 110-B East Broad Street

City Falls Church State FL Zip Code 22046

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. Bill Nelson

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 2

Transaction ID: 24093370

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Tiberi for Congress

Mailing Address 211 South Fifth St.

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. Patrick Tiberi

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: 24096675

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cardoza for Congress

Mailing Address 2724 Winton Way

City Atwater State CA Zip Code 95301

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. Dennis Cardoza

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 18

Transaction ID: 24098836

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Edward Kennedy

Mailing Address PO Box 1400

City Boston State MA Zip Code 02205

Purpose of Disbursement

011
Category/
Type

Candidate Name
Senator Edward Kennedy

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 1

Transaction ID: 24084493

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Edward Kennedy

Mailing Address PO Box 1400

City Boston State MA Zip Code 02205

Purpose of Disbursement

011
Category/
Type

Candidate Name
Senator Edward Kennedy

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 1

Transaction ID: 24084494

Date of Disbursement

06 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cardoza for Congress

Mailing Address 2724 Winton Way

City Atwater State CA Zip Code 95301

Purpose of Disbursement
Void - Cardoza for Congress

Candidate Name
Mr. Dennis Cardoza

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 18

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24116363

Date of Disbursement

06 / 07 / 2006

Amount of Each Disbursement this Period

-1000.00

Void - Cardoza for Congress

Full Name (Last, First, Middle Initial)

B. Langevin for Congress

Mailing Address 181-A Knight St.

City Warwick State RI Zip Code 02886

Purpose of Disbursement

Candidate Name
Mr. James Langevin

Office Sought: ☒ House
☐ Senate
☐ President

State: RI District: 2

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24121703

Date of Disbursement

06 / 08 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Hafen For Congress

Mailing Address PO Box 530996

City Henderson State NV Zip Code 89053

Purpose of Disbursement

Candidate Name
Tessa Hafen

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 3

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24147190

Date of Disbursement

06 / 13 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pryce for Congress

Mailing Address 340 East Gay St.

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011

Category/
Type

Candidate Name
Ms. Deborah Pryce

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 24163617

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Peter King for Congress

Mailing Address 1442 Roth Rd
118 Cannon House Ofc Bldg

City Seaford State NY Zip Code 11783

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Peter King

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 3

Transaction ID: 24163618

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Tom Davis for Congress

Mailing Address P.O. Box 483

City Dunn Loring State VA Zip Code 22027

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Tom Davis

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 11

Transaction ID: 24163616

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Burr Committee

Mailing Address PO Box 5928

City
Winston-Salem

State
NC

Zip Code
27113

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr Richard Burr

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼
2010Primary

State: NC District: 5

Transaction ID: 24163623

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of John Peterson

Mailing Address 1524 West College Avenue

City
State College,

State
PA

Zip Code
16801

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. John Peterson

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 5

Transaction ID: 24163610

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Roy Blunt

Mailing Address 2740-B East Sunshine Street

City
Springfield

State
MO

Zip Code
65804

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Roy Blunt

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 7

Transaction ID: 24163608

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Roy Blunt

Mailing Address 2740-B East Sunshine Street

City Springfield State MO Zip Code 65804

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Roy Blunt

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 7

Transaction ID: 24163609

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Volunteers for Shimkus

Mailing Address PO Box 2776

City Arlington State VA Zip Code 22202

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr John Shimkus

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 20

Transaction ID: 24163625

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Nelson for Senate

Mailing Address 110-B East Broad Street

City Falls Church State FL Zip Code 22046

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Bill Nelson

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 2

Transaction ID: 24163613

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nelson for Senate

Mailing Address 110-B East Broad Street

City Falls Church State FL Zip Code 22046

Purpose of Disbursement

Candidate Name
Mr. Bill Nelson

Office Sought: ☐ House
☒ Senate
☐ President

State: FL District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24163614

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Congressional Majority Committee PAC

Mailing Address P.O. Box 746

City Bakersfield State CA Zip Code 93302

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24163740

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Rogers for Congress

Mailing Address 1321 E. Michigan Avenue

City Lansing State MI Zip Code 48912

Purpose of Disbursement

Candidate Name
Mike Rogers

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 8

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24163619

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rogers for Congress

Mailing Address 1321 E. Michigan Avenue

City Lansing State MI Zip Code 48912

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mike Rogers

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 8

Transaction ID: 24163620

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Campaign for America's Future

Mailing Address PO Box 1480

City Washington State DC Zip Code 20013-1480

Purpose of Disbursement

011
Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 24163611

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Murphy for Congress

Mailing Address PO Box 11721

City Pittsburgh State PA Zip Code 15228

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. Timothy Murphy

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 18

Transaction ID: 24163624

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brown-Waite for Congress

Mailing Address 6135 Deltona Blvd.

City
Spring Hill

State
FL

Zip Code
34606

Purpose of Disbursement

011

Category/
Type

Candidate Name
Ms. Ginny Brown-Waite

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 5

Transaction ID: 24163702

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Barrett for Congress Committee

Mailing Address PO Box 869

City
Westminster

State
SC

Zip Code
29693

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Gresham Barrett

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 3

Transaction ID: 24163622

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TOMPAC

Mailing Address PO Box 16488

City
Arlington

State
VA

Zip Code
22215

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 24163615

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. LINC PAC

Mailing Address 122 Maryland Avenue NE
Ste. 3D

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24163890

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

B. Phil PAC

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24166340

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

4000.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

C. Freedom Fund

Mailing Address 128 N Columbus Street

City ALEXANDRIA State VA Zip Code 22344

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24163688

Date of Disbursement

06 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

011

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. DAKPAC

Mailing Address 420 C St., NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24177019

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

B. Hillary Clinton for Senate

Mailing Address 1730 M Street NW
Suite 413

City Washington State DC Zip Code 20036

Purpose of Disbursement

Candidate Name
Ms. Hillary Clinton

Office Sought: ☐ House
☒ Senate
☐ President

State: NY District: 2

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24192819

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

C. Hillary Clinton for Senate

Mailing Address 1730 M Street NW
Suite 413

City Washington State DC Zip Code 20036

Purpose of Disbursement

Candidate Name
Ms. Hillary Clinton

Office Sought: ☐ House
☒ Senate
☐ President

State: NY District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24192821

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

011

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

14000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hawkeye PAC

Mailing Address PO Box 7255

City
Des Moines

State
IA

Zip Code
50309

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24192817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

B. Norwood for Congress

Mailing Address PO Box 499

City
Evans

State
GA

Zip Code
30809-9906

Purpose of Disbursement

Candidate Name
Dr. Charles Norwood

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 10

Disbursement For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24194428

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

011

Category/
Type

Full Name (Last, First, Middle Initial)

C. Team Emerson

Mailing Address PO Box 822

City
Cape Girardeau

State
MO

Zip Code
63702

Purpose of Disbursement

Candidate Name
Ms. JoAnn Emerson

Office Sought: ☒ House
☐ Senate
☐ President

State: MO District: 8

Disbursement For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24194427

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

011

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stabenow for Senate

Mailing Address PO Box 4945

City
East Lansing

State
MI

Zip Code
48826

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Debbie Stabenow

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

State: MI

District: 2

Transaction ID: 24194426

Date of Disbursement

06 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Graves for Congress

Mailing Address PO Box 34744

City
Kansas City

State
MO

Zip Code
64116

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Sam Graves

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2006

☒ Primary

☐ General

☐ Other (specify) ▼

State: MO

District: 6

Transaction ID: 24194425

Date of Disbursement

06 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Hall For Congress Committee

Mailing Address Post Office Box 711

City
Rockwall

State
TX

Zip Code
75087

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Ralph Hall

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

State: TX

District: 4

Transaction ID: 24194416

Date of Disbursement

06 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. VINE PAC

Mailing Address 227 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24194424

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Ron Lewis for Congress

Mailing Address 1705 N. Dixie Star PLaza, #73
2233 Rayburn House Ofc Bldg

City ?Elizabethtown State KY Zip Code 42701

Purpose of Disbursement

Candidate Name
Mr. Ron Lewis

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 2

Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24197347

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

101500.00